PTO/SB/17 (10-07)
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Under the	Arwork Theopetion Act of	1995, no person are re	equired to	respond to a collection	n of informati	on unless it displays	s a valid OMB co	ntrol number	
	Effective on 12/08/	Complete if Known							
Fees pursuant to t	he Consolidated Approp			10/528,407-Conf. #4454					
FEE	TRANS			March 18, 200					
	For FY 20			Oiva Pehkone	en et al.				
	FULL 1	Examiner Name		T. C. Vanoy					
Applicant	claims small entity state	us. See 37 CFR 1.2	7	Art Unit		1754			
TOTAL AMOUNT OF PAYMENT (\$) 1,780.00			Attorney Docket No. 43289-215080						
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP									
For the	above-identified depo	sit account, the D	irector is	s hereby authorize	ed to: (chec	ck all that apply)			
	narge fee(s) indicated					dicated below, e		fillng fee	
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCUL	<u> </u>			·					
1. BASIC FILING	G, SEARCH, AND E	XAMINATION FE	ES						
	FI	LING FEES	SE	ARCH FEES	EXAMIN	NATION FEES	•		
Application Ty	rpe Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	ld (\$)	
Utility	310		510	255	210	105			
Design	210	105	100	50	130	65			
Plant	210	105	310	155	160	80			
Reissue	310	155	510	255	620	310			
Provisional	210	105	0	0	0	0			
2. EXCESS CLA		103	Ů	Ū	ŭ	ŭ	s	mall Entity	
Fee Description	AIM FEED						Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues) 50 25								25	
2441 (1441 474 474 474 474 474 474 474 474 474							105		
Multiple depend	lent claims						370	185	
Total Claims	Extra Claims	Fee (\$)	Fee	Paid (\$)	aid (\$) Multiple Dependent Claims				
	- 20 =	x = _			Fe	e (\$)	Fee Pald (\$)		
HP = highest num	ber of total claims paid fo	r, if greater than 20.						_	
Indep. Claims	Extra Claims	Fee (\$)	Fee	Paid (\$)					
	- 3	x = =	nn 2						
	ber of independent claims	s paid for, it greater the	an s.						
3. APPLICATIO	N SIZE FEE	vosed 100 sheets	of naner	(excluding electr	onically fi	led sequence or	computer		
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50									
sheets or fr	action thereof. See	35 U.S.C. 41(a)(1)(G) and	37 CFR 1.16(s).		• .			
Total Sheet				additional 50 or fra	ction thereo	of Fee (\$)	Fee Pa	ald (\$)	
	100 =	/50 =		(round up to a who	ole number)	x	=		
4. OTHER FEE	(S)						Fees P	aid (\$)	
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 8021 Recording each patent assignment, agreement or 40.00 1501 Utility issue fee 1,440.00									
		1504 Publicat	ion fee	for early, volunt	ary, or no	rmal	300		
		7 7	9/	/					
SUBMITTED BY	(c	Hant	16	Registration No.	37,134	Telephone	(202) 344	-4936	
Signature	Fric I Franklin	, y v ~		(Attorney/Agent)	01,104	Date	October 30		

PTO/SB/21 (10-07)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/528,407-Conf. #4454

Filing Date March 18, 2005

First Named Inventor Oiva Pehkonen et al.

Art Unit 1754

Examiner Name T. C. Vanoy

Attorney Docket Number 43289-215080

ENCLOSURES (Check all that apply)								
X Fee Transi	mittal Form	Drawing(s)	[After Allowance Communication to TC				
Fee A	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences				
Amendment/Reply		Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After Final		Petition to Convert to a Provisional Application		Proprietary Information				
Affida	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address		Status Letter				
Extension of Time Request		Terminal Disclaimer		X Other Enclosure(s) (please Identify below):				
Express At	pandonment Request	Request for Refund		PART B - FEE(S) TRANSMITTAL				
Information	Disclosure Statement	CD, Number of CD(s)		ASSIGNMENT/NAME CHANGE W/ RECORDATION				
Certified Copy of Priority Document(s)		Landscape Table on CD		COVERSHEET				
Reply to Missing Parts/ Incomplete Application		Remarks						
Reply to Missing Parts under 37 CFR 1.52 or 1.53								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name	VENABLE LLP							
Signature								
Printed name	Eric J. Franklin							
Date	October 30, 2007		Reg. No.	37,134				